

The TDY Travel Desk Guide

Greetings from the HRSIC
Travel Business Line



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- **This desk guide has been developed to answer many common travel questions and give you step-by-step procedures in the travel process. We want you and your coworkers to refer to it and receive satisfactory assistance.**
- **Our mission is to ensure proper travel settlements to Coast Guard travelers in an accurate and timely manner. If we hit or miss the mark - - let us know!!**

For Process Improvements or Suggestions Call

Manager	785-295-2265
Assistant Manager	785-295-2264
CAT Supervisor	785-295-2228
EC Supervisor	785-295-2202
WC/PCS Supervisor	785-295-2237
Civilian PCS Technician	785-295-2209
Industrial TVL Claims	785-295-2232

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HRSIC Travel Customer Network

This assistance network promotes the partnership needed to assist travelers and unit administrative personnel with inquiries regarding travel policy, procedure, claim preparation, status, and settlements. The HRSIC (TVL) toll free claims assistance number is intended for members and employees who do not have access to an FTS phone system, or to call from home, and can be reached by dialing

1-888-872-4885
(1-888-USCG-TVL)

Claims Assistance Team (CAT)

The Claims Assistance Team deals directly with all the following:

- ⇒ Travelers
- ⇒ Order Issuing Activities
- ⇒ Travel Budget Managers
- ⇒ Personnel that prepare Travel Orders
- ⇒ Travel Pay Non-Receipt Issues

The numbers:

Voice

785-295-2250, 2258, 2251

East Coast Liaison: 785-295-2204

West Coast Liaison: 785-295-2221

Fax

785-295-2940

SWIII - Global Address: HRSIC-TVL SCT
 FLASTNAME@hrsic.uscg.mil

SWII - Email: CSTVL/HRSIC15

F.LSTNAME/HRSIC@MAILANT.USCG.MIL

West Coast Team (WC)

The West Coast Team customers are all travelers stationed within the geographic boundaries of:

y CGD17	y CGD8
y MARSEC	y CGD9
y FESEC	y CGD11
y PACAREA	y CGD13
y MLCPAC	y CGD14

The numbers:

Voice

785-295-2223, 2227, 2222, 2237

Fax

785-295-2835, 2960, or 2836

Mail claims to:

Commanding Officer
Human Resources Service &
Information Center
PO Box 3552
Topeka, KS 66601-3552

East Coast Team (EC)

The East Coast Team customers are all the travelers stationed within the geographic boundaries of:

y CGD1	y LANT AREA
y CGD5	y MLCLANT
y CGD7	y GANTSEC
y Europe	
y Headquarters (COMDT, CG PERSCOM, & HSC)	

The numbers:

Voice

785-295-2212, 2214, 2202, 2219

Fax

785-295-2837 or 2976

Mail claims to:

Commanding Officer
Human Resources Service &
Information Center
PO Box 3351
Topeka, KS 66601-3551

**FINCEN
HELPS
TRAVELERS
TOO!**

With the FINCEN toll free travel payment disbursing number, you can obtain your travel payment status. Just follow the telephone prompts to receive the status of your last five travel claims!

CG Travelers
1(800)564-5504
OCONUS CG Travelers
(757)523-6940

Which Travel Voucher Form Should Travelers Use?????



Answer: With the changes in travel regulation, the use of Travel Voucher Form DD1351-2 (Aug 97) helps clarify a traveler's status and greatly facilitates settlement of travel claims.

These forms are available on both SWIII and SWII at the following locations:

SWIII: Jetform filler

SWII: For the CTOS version, call Barbara Davis at (202)267-2362

The oldest version DD 1351-2 (Jan 1978) **shall not** be used.

**Better Quality
Faster Claim Settlement
Faster, better, cheaper...**

**Consider submitting travel
claims by fax!**

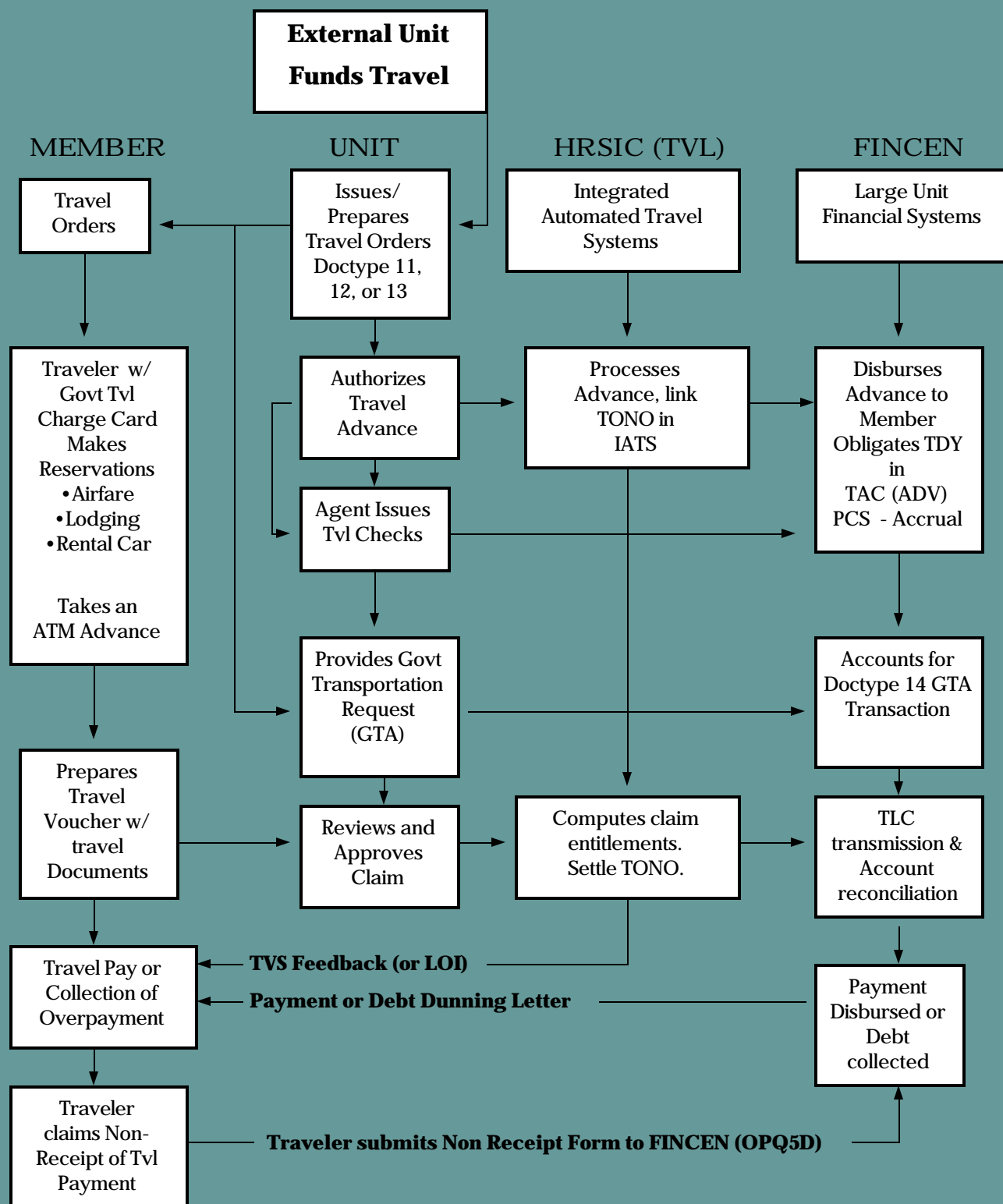
**See the Pay & Personnel Pro-
cedures Manual, Appendix E,
or HRSICINST 4600.1 (series)**

Easier Supplemental Travel Claim Submission Procedures

Goal: Reduce time, effort, and handling of travel claim rework caused by simple oversights.
Call the Claims Assistance Team for assistance – 1 (888) USCG-TVL.

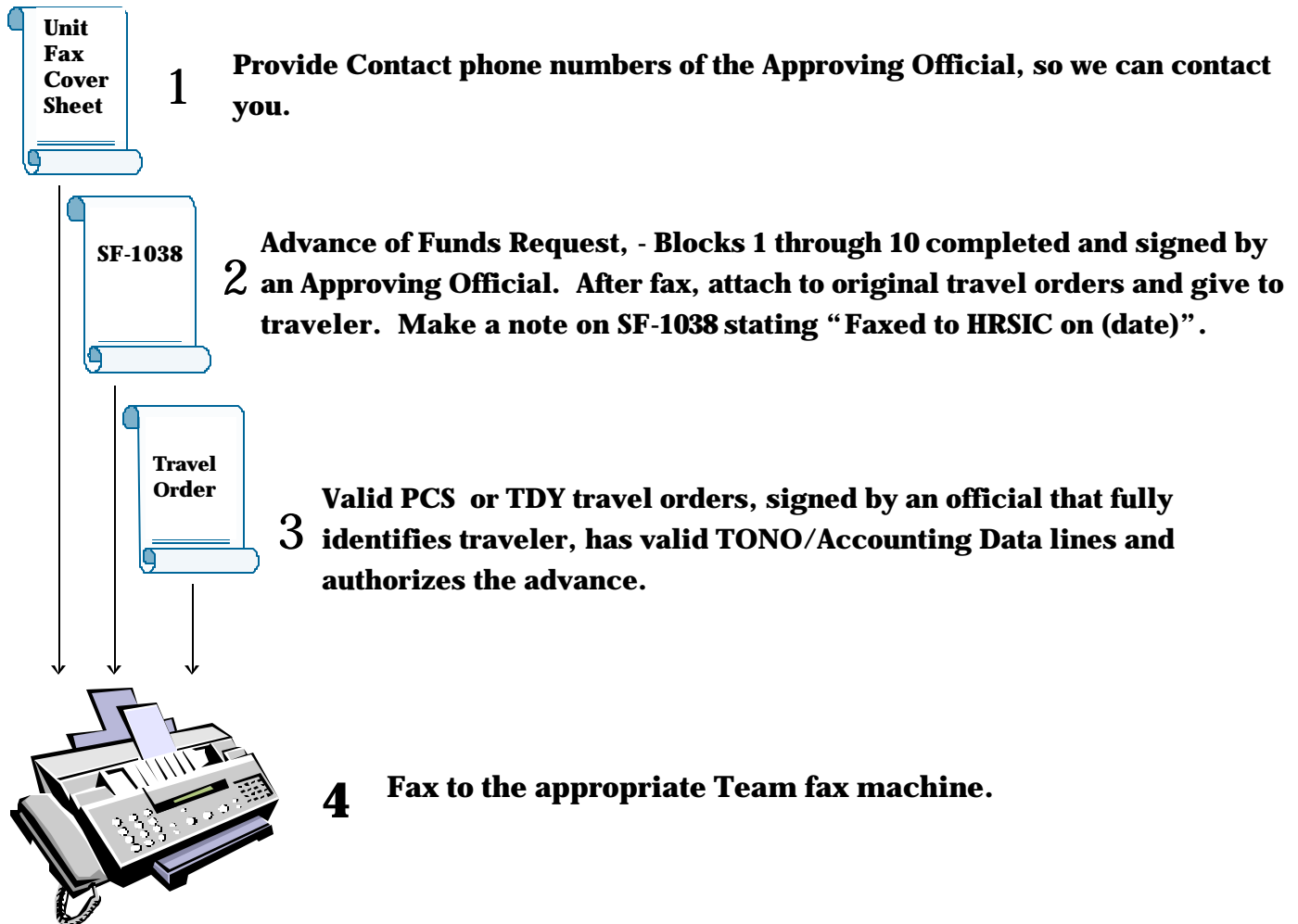
If	Then
1 HRSIC (TVL) missed a claimed reimbursable expense or made a settlement error...	The claimant should contact CAT. No additional paperwork is necessary! We own up to our mistakes and will initiate supplemental action by your phone call to ensure you get accurately reimbursed. Unfortunately, we must deny expenses that are without required receipts (lacking substantiation).
2 DD-1351-2 Travel Data Oversight claimant failed to complete a block or itemize necessary travel-related expenses on the travel voucher...	The claimant should contact CAT for service. The claimant must retrieve a copy of their original DD-1351-2 and complete the following: <ol style="list-style-type: none"> 1 Write "SUPPLEMENTAL" and today's date in block 3.c. 2 In block 22, explain and write in the missed reimbursable item and cost 3 Claimant will sign beneath entry. 4 Claimant will have their Supervisor "ADMIN REVIEW" the supplemental: sign and date. 5 FAX the supplemental to CAT.
3 Lodging Expenses were denied because claim package lacked the required lodging receipt...	The claimant should contact CAT and thereafter FAX a legible copy of the lodging receipt or signed lost statement that includes: <ul style="list-style-type: none"> y name & address of lodging facility; y dates lodging obtained and the daily cost incurred; and y whether or not the room was shared.
4 Transportation or Other Expense Denied - an approved authorized reimbursable lacked the required receipt (rental car, airfare or form of payment data) valued at 75.00 or more...	The claimant should contact CAT and thereafter FAX a legible copy of the receipt or signed lost statement showing item purchased, cost and form of payment.
5 TRAVEL ORDER DID NOT AUTHORIZE THE EXPENSE.	Explain situation to your supervisor, and if applicable, have Travel Orders amended by proper authority and follow steps in item 2 above.
6 A claimed expense is denied by HRSIC (TVL) because it is NOT travel-related.	Prepare a SF-1164 and submit to your Unit Supply Officer/Comptroller and request reimbursement.

Travel Process Flowchart



Processing Travel Advances Via Fax

Follow these steps and sequence.



After faxing, check the communications result, and keep it as confirmation.

Note:

To avoid duplicate payments, do not Fax the same request more than once and do not mail it to HRSIC.

Advances are processed within 30 hours of receipt. If status needs to be checked, call CAT. Payment should be received within 7 working days.

Which TDY Expenses are Reimbursable?

There are two basic groups: (1) Allowable expenses that must be (a) preauthorized and (b) stated on orders; and (2) necessary miscellaneous expenses incident to travel.

Here is a list of expenses that are allowable pursuant to Travel Orders.

y **Lodging:**

- TDY duration greater than 12 hours
- Taxes for CONUS lodging are excluded from the total lodging expense and should be claimed as a reimbursable expense
- A receipt or signed lost receipt statement is required for all claimed lodging expenses

y **Communication Services** must be authorized on orders to allow reimbursement for long distance, data, and/or fax calls.

y **Rental Vehicle and Fuel** must be authorized on orders to include the specific size vehicle allowed: Authorized rental vehicle sizes correspond with the number of **authorized** occupants.

- 1-2 occupants - Compact car
- 3-4 occupants - Midsize car
- 5 or more - Full size car or van

y **Passport and/or Visa** fees per COMDTINST 4650.9C must be authorized on orders.

y **Authorization to travel via POC** when that mode is more advantageous to the Government. Cost formula and criteria found at 3305, CG Supplement to the JFTR, COMDTINST M4600.

y **ATM usage** cannot exceed the amount authorized on the orders.

y **Ombudsman Child Care Services** per COMDTINST 1750.4B must be authorized on invitational order to the Ombudsman.

y **Registration/Seminar/Conference Fees** (i.e. meeting room, audio visual costs, and other conference related admin fees) must be authorized on orders for reimbursement and require a receipt if cost is \$75 or more.

y **Actual Expense** must be stated on the orders or the member will not receive the entitlement. Each trip must be authorized by date. Entry shall read: "AEA in the amount of (\$) at (City, ST) for TDY period (date)".

Here is a listing of allowable necessary miscellaneous expenses incident to travel. (**See Part F, JFTR, Misc. Reimbursable Expenses**):

Describe and list these expenses on the Travel Voucher, DD-1351-2 (Aug 97):

- Cost of Travelers Checks –Block 18
- Commercial Ticketing Office service and processing service charge –Block 18
- POC mileage –Blocks 15f and 16
- Parking –Block 18
- Transit service charges and taxes –Block 18
- Tolls, fares, etc. –Block 18
- CONUS Daily Lodging Taxes –Block 18.

Daily Expenses Reimbursed by HRSIC (TVL)

By the functional authority outlined in the FINCEN SOP, HRSIC (TVL) can only process travel-related expenses, i.e., those expenses associated with TDY travel, as broadly stated here:

- Transportation related (Fares to, from, and around TDY/ PDS site).
- Trip Preparatory Expenses (Admin fees, ATM fees, etc.)
- Reimbursement for specified entitlements as Travel Order Issuing Official directs (i.e., Communication Services, Rental Vehicles, and Seminar or Conference Registration Fees, etc.)

Expenses NOT Reimbursed by HRSIC (TVL)

Simply, any item not related to travel will be denied.

- Personal Items such as: flowers, postage stamps, pet fees, uniform items, health or medical expenses, movies, food expenses in excess of M&IE rate.
- Mission-related items. These expenses must be paid through your Supply Office: camera purchase, uniform items, books, office supplies, etc.
- Do not claim fares provided by Government Transportation Accounts (GTA).

Notice

Any and each of the above expenses must be described/listed on the Travel Voucher to effect reimbursement. RECEIPTS ARE MANDATORY FOR: (A) All lodging claims, and (B) any claimed expenses of \$75 or over.

Preparing TDY Travel Orders

Simplified Plain Paper Approach that Achieves Travel Claim Settlement

Regardless of what form or format is used to create the TDY order, there are several questions that need to be answered by the information contained in the TDY Order.

WHO is being ordered to travel...	Fully identify the traveler and their Permanent Duty Station (PDS); need SSN or citizenship if not US citizen
WHAT the traveler intends to accomplish...	State the purpose or objective of the travel.
WHERE is the travel to be performed...	Provide the name of the unit or the TDY locality that is being visited (City or County, State). The locality affects the per diem rate!
HOW is the travel to be performed...	Direct what type of transportation methods the traveler will use to (1) get to/from the TDY site; and (2) travel in and around the TDY site.
WHAT GOVERNMENT FACILITIES are available at the TDY site.. (Direct use of Govt mess)	When available, travelers should be directed to use Government Quarters and Messing facilities. If no Government facilities, the commercial per diem rate applies – State the per diem rate.
WHAT is the travel cost estimate...	Cost estimates are formulated by adding: (1) all airfares, mileage, transportation expense; and (2) multiplying the number of TDY days times the locality per diem rate.
PROVIDE TONO and Accounting Lines	To be reimbursable, the travel expense(s) must be chargeable to a unit accounting string and a Doctype 11 - TDY Travel Order Number; or Doctype 13 - Blanket/Repeat TONO assigned.

STANDARD STOCK ENTRIES FOR ALL TRAVEL ORDERS:

- ⇒ The travel order must indicate WHAT specific expenses are authorized. See reimbursable section and be **PRECISE!**
- ⇒ If a travel advance is warranted, it must be authorized on orders

Step	Entry
1	The purpose and justification for travel (see Block 9a).
2	Type TDY Quarters Directed: (Indicate what is applicable: either Government or Commercial).
3	Type TDY Messing Directed: (Indicate what is applicable: either Government Rate, Proportional Rate, Commercial Rate, or No Per Diem or Reduced Per Diem of \$____ IAW COMDT (G-WPM-2) ltr 4600 of (date).)
4	The mode of travel authorized (direct or explain what transportation will be used) If needed, authorization for a rental car; include the size: Y If car size is other than a compact, include justification.
5	Whether or not the traveler has a Government Travel Charge Card and the amount of advance authorized.
6	Any special instructions to the traveler (where to report, security clearance, etc.) If order is funded by an agency other than the USCG, include agency name, unit, department, phone number, billing address and Reimbursable Agreement Number (RAN) as obtained from FINCEN (OGR). Attach copy of that agency authorization.

Note:

When travel orders do not direct the Government Meal Rate, or Proportional Meal Rate, or a Reduced Per Diem Rate, the settlement will result in the locality M&IE rate being paid.
(See U4125-A3g, JFTR for "deductible meals").

Document Identification Numbers (TONOs) & DAFIS Accounting Strings

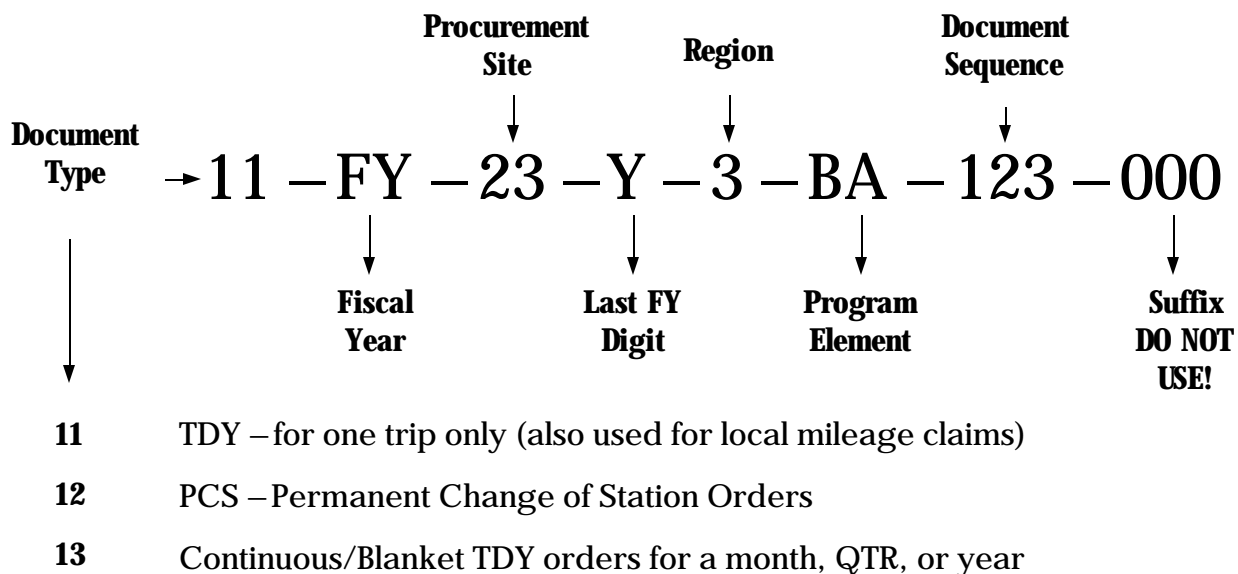
Professional Finance Center SOP, Appendix C (Travel and Transportation)

Guidance <http://cgweb.hsc.comdt.uscg.mil/g-c/g-cfp/finance/sop/toc.htm>

- 7 A written order, along with TONO/Accounting String, is required for reimbursement of expenses incident to official travel. Each travel order or local mileage claim (SF-1164) requires two distinct lines: (1) TONO; and (2) DAFIS Accounting String.
- 7 Document types, in order to reimburse a member for travel expenses, the travel order **must** possess one of these types (Reservists take note: Doc type 72 (milpay) TONO cannot reimburse travel expenses):

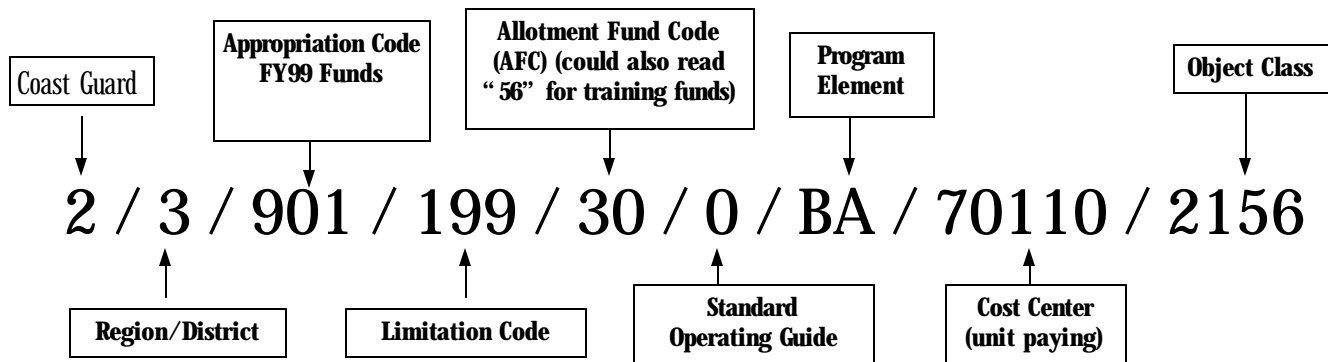
HR SIC (TVL) CANNOT PROCESS TRAVEL CLAIMS WITHOUT TONOS & ACCOUNTING STRINGS. MAKE CERTAIN TO INCLUDE THEM ACCURATELY

Example:



DAFIS Accounting String: This info records what account will be charged.

Example:



An area that delays a claim is when the Allotment fund code is "80" (vice 30 or 56). That means you are on TDY with another GOVT agency, and they are paying for that TDY. In this case, you must obtain a Reimbursable Agreement Number (RAN) from FINCEN prior to traveling. The point of contact at FINCEN for obtaining your RAN is Susan Belcher at (757)523-6890. Note: CG TONOs & accounting strings are still used in this process for these claims.

TRAVEL ORDER EXAMPLE

DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD CG-4251 (TEST)		MILITARY TEMPORARY ADDITIONAL DUTY (TAD) OR CIVILIAN TEMPORARY DUTY (TD) REQUEST AND TRAVEL ORDER			SOCIAL SECURITY NO. 123 45 6789	
When signed by Authorizing Official, this form becomes an Official Travel Order. Request below named person be authorized to perform the following TAD/TD on official business of the Coast Guard.						
1. NAME COASTY, JOSEPH A.		2. GRADE/RATE BM1/E-6		3. DIV/BRANCH MARINE SAFETY		4. EXT. DUTY PHONE #
5. DEPARTURE DATE 06MAY99		6. ESTIMATE DAYS ABSENT 20 DAYS		7. ESTIMATED COST \$1,500.00		8. REPEAT TRAVEL ORDERS FOR THE PERIOD FROM <u>BLANKET</u> TO <u>TVL DATES</u>
A. Command, District, Firm or Organization. (List in sequence)				B. LOCATION		C. DATE/TIME (If critical)
9. Places to visit 1. List each TDY destination & purpose for travel. State purpose for travel here or in remarks - (ie SHIPBOARD or FIELD DUTY, INPATIENT, TRAINING, etc.) "Changes to this itinerary must be documented with amendment- to orders signed by order issuing authority"				City, State (County)		D. REVISIT (yes/no)
				2400, 06MAY99 or if BLANKET orders: type (MONTHLY, QUARTERLY, ANNUAL)		Explain
10. REQUEST		11. MODE OF TRAVEL		NOT APPRVD.		NOT AUTH.
A. <input type="checkbox"/> REGIS. FEE \$		<input type="checkbox"/> COMMERCIAL CARRIER		<input type="checkbox"/> GOVT. CONVEYANCE		<input type="checkbox"/>
B. <input type="checkbox"/> EXCESS BAGGAGE (_____ LBS.)		<input type="checkbox"/> PRIVATELY OWNED CONVEYANCE				<input type="checkbox"/>
C. <input type="checkbox"/> LOCAL TRAVEL-TAXI		<input type="checkbox"/> It has been administratively determined that this method of travel is more advantageous to the Government, IAW JTR, M4204.5.b.				
D. <input type="checkbox"/> 1ST CLASS JET		<input type="checkbox"/> The total cost to the Government, including per diem, does not exceed the total cost of travel by common carrier, including per diem. (Civilians only.)				
E. <input type="checkbox"/> U-DRIVE/GSA VEHICLE						
F. <input type="checkbox"/> _____ DAYS LEAVE						
12. PURPOSE OF TRAVEL AND JUSTIFICATION(S) FOR REQUIREMENTS CHECKED IN ITEM 10, AND/OR 11.						
2. State type of TDY quarters directed. (Indicate either GOVT or COMMERCIAL)						
3. State type of TDY mess directed. (GOVT RATE, PROPORTIONAL RATE, COMM RATE or NO PER DIEM)						
4. State transportation mode directed in block 11 or in remarks. Authorized RENTAL VEHICLE <u>No</u> Yes. Rental size authorized _____ IAW U3415 JFTR.						
5. Member does/does not have Govt travel charge card. Advance travel \$ _____ authorized.						
6. Other entries: "REDUCED PER DIEM applies \$ _____ IAW COMDT (G-WPM-2) LTR 4600 of (Date); IAW U4210 & U4215 JFTR, Authorized ACTUAL EXPENSE for (DATES) not to exceed (150% or 300%) of locality rate; Authorized COMMUNICATION SERVICES _____ IAW U4505 JFTR."						
RECEIPTS ARE REQUIRED FOR ALL LODGING, AIRFARE, RENTAL VEHICLES & EXPENSES OF \$75 OR GREATER.						
13. DATE 30APR99		TRAVEL REQUESTED BY (Signature and Position Title) Joseph A. Coasty (SIGNATURE REQUIRED)				
14. Except as noted, TAD/TD is approved and chargeable below.				15. Funds available for request as estimated below.		
DIST	APPN. CODE	LIM. CODE	ALLOT FUND	PROGRAM ELEMENT	COST CENTER	ESTIMATED COST
2P	901	199	56	0/BJ	70850	\$1,500.00
14a. DATE 20APR99		SIGNATURE (Approving Official) APPROVING OFFICIAL		15a. DATE 30APR99		SIGNATURE (Accounting Division/Branch) USUALLY UNITS FUNDS COORDINATOR
16. Authorized Civilian mileage (See DOT Travel Manual, 1500.6, Appendix C.) <input type="checkbox"/> _____ <input type="checkbox"/> NONE <input type="checkbox"/> NTE COST BY COMMON CARRIER INCLUDING PER DIEM				17. Authorized CIVILIAN per diem. (See DOT Travel Manual, 1500.6, Appendix D/Chapter 4, respectively.) <input type="checkbox"/> _____ PLUS LODGING NTE _____ <input type="checkbox"/> TRAVEL OF 24 HOURS OR LESS <input type="checkbox"/> NONE <input type="checkbox"/> OTHER (Specify) _____		
DATE SIGNATURE (Authorizing Official, Items 16. & 17.)				BLOCKS 16 & 17 Civilian travel only.		
18. FROM: Commander, Coast Guard Group Anywhere TO: BM1 Josphe A. Coasty, USCG (R) 1. Except as noted, the approved TAD/TD is authorized and directed. Proceed and report to the places and in the order listed in Item 9, above. Deviations should not be made to visit places or areas not listed in Item 9, above, without prior written or verbal orders from proper authority. Upon completion of the TAD/TD directed, return to this command and resume your regular duties. (Military per diem is authorized as prescribed in Joint Travel Regulations.)						
DISTRIBUTION: Provide these original orders with your DD Form 1351-2 for reimbursement of entitlements. Copy Distribution: (Member) (Field Unit) (TDY Unit) & (Order Issuing Authority)						
19. DATE 30APR99		SIGNATURE (Authorizing Official) Command Authorizing Official (SIGNATURE REQUIRED)				

BLANKET ORDERS

Reference:

- **Section 2-B and Appendix E, Pay and Personnel Procedures Manual (3PM), HRSICINST M1000.2A**
- **DAFIS Document Type 13 Procedures, page 12C-19, FINCEN SOP contains guidance on the preparation of Blanket Travel Orders.**

To assist Order Issuing Officials in producing an up to date Blanket order that encompasses the broad scope of Travel requirements, we can provide a fax or e-mail image of sample order upon request. The requirements for these types of orders are:

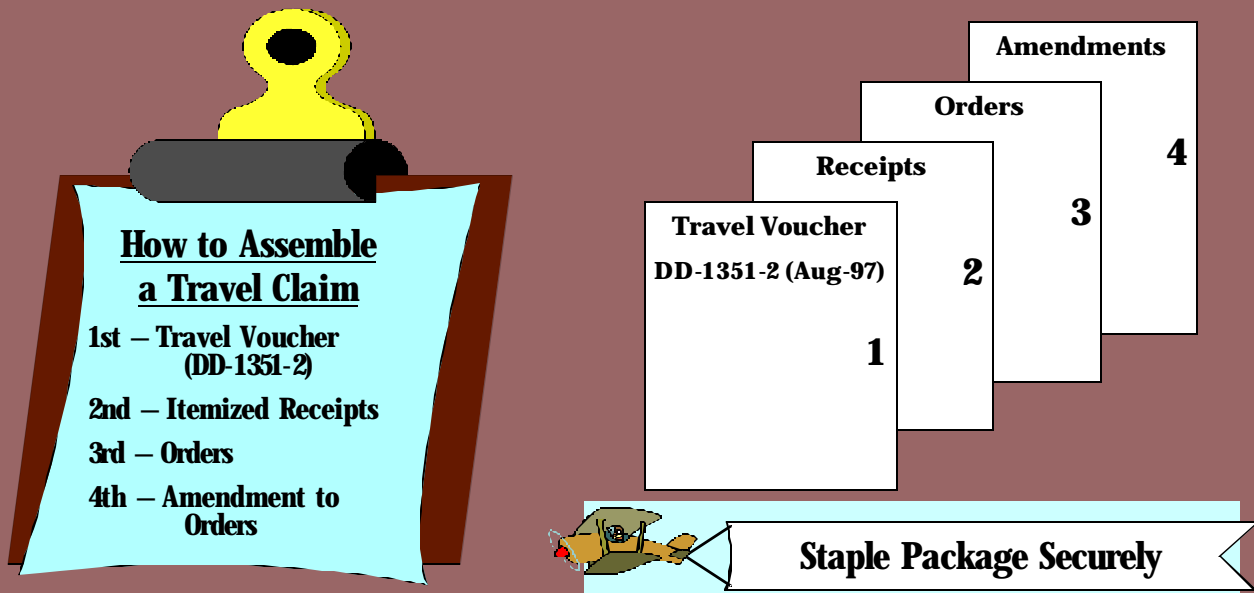
- Be an order for an individual traveler (no group travel orders);
- Define the travel time period covered by inclusive dates;
- Define the geographic area in which travel can be performed.

Order Issuing Officials will periodically have to amend blanket orders for a particular trip to authorize certain entitlements that **must** be authorized only on a case-by-case basis, such as Actual Expense Allowance (AEA), use of a larger rental vehicle or van, excess baggage, etc.

For Blanket Order travel claims, please follow these procedures to insure prompt claim settlement:

- y Order Issuing Officials shall retain and hold all original blanket orders.
- y Each blanket order must contain a remark indicating where the original blanket order is held/filed in order for HRSIC (TVL) Auditing Officials to recall the authorization.
Example: "The original of this Blanket Order is held by CCGD1 (m) at (phone number)".
- y Provide the traveler with a sufficient amount of signed copies of the blanket order, marked and individually authenticated as "CERTIFIED TO BE A TRUE COPY".
- y The frequent traveler, in order to submit a claim, must attach a "CERTIFIED" copy of the blanket order with each travel voucher/claim submission (along w/necessary receipts). Processing of any travel voucher/claim received without a copy of the blanket order will be delayed because the claim will be returned to the traveler without action or held until the order is received.





Administrative Review Checklist

No.	Question	Initials
1	Is the method of payment selected in block 1? Is the type of payment (TDY/PCS) selected in block 2? Split disbursement is not currently in use.	
2	Are the name (block 4), rank (block 5) and SSN (block 6) complete and legible?	
3	Is there a complete mailing address listed in blocks 7a through d (including zip code) regardless of the method of payment selected?	
4	Is there a correct duty phone number listed in block 8 for daytime contact?	
5	Is the Travel Order Number (TONO) listed in block 9 properly? This must be 13 characters followed by ' 000' for a total of 16 characters. (Industrial travelers may disregard this verification.)	
6	If advances were charged to the orders (Government), are they listed in block 10? (Make sure advances charged to the mbr's Government Travel Charge card are not listed here!)	
7	Do the dates in the Itinerary section (block 15a) agree with the orders?	
8	Have the correct codes for Mode of Travel (block 15c) and Reason for Stop (block 15d) been entered, and do they agree with the others?	
9	If POC is authorized and used: a) Is the mileage recorded in block 15f.; b) Has the correct block been	
10	Reimbursable Expenses (block 18): a) Has total cost of lodging been entered and an original itemized receipt attached?; b) If rental vehicle is authorized has the total been listed and the original itemized rental contract	
11	If additional travel was performed, have the orders been appropriately amended?	
12	If proportional per diem applies: Do the orders authorize the appropriate days? If member was expected to use government messing did the orders "Direct" use?	
13	If leave was authorized in conjunction with this travel, has the complete leave information been entered in block 29 (reverse side of DD-1351-2)?	
14	For phone call reimbursement, have communication services been approved by the order issuing activity on the travel orders or in an appropriate amendment?	
15	You are the Approving Official: Print or type your name, rank, and telephone number in block 21a. Sign and date the claim in blocks 21a and b.	
16	The claim package consists of the ORIGINAL claim and orders (+ 1 copy) and the ORIGINAL receipts (staple the package together; do not use paper clips; do not fold). Mail to HRSIC (TVL) using appropriate mail stop code and PO Box number, located on page 2.	

Processing Local Travel Claims (SF-1164)

HRSIC (TVL) can only process travel-related expenses, i.e., those expenses associated with Local Travel, as broadly stated here:

- y Transportation related (Fares to, from, and around TDY/PDS site).
- y Trip Preparatory Expenses (Admin fees, ATM fees, etc.)
- y Reimbursement for specified entitlements as Travel Order Issuing Official directs (i.e., Communication Services, Rental Vehicles, and Seminar or Conference Registration Fees, etc.)

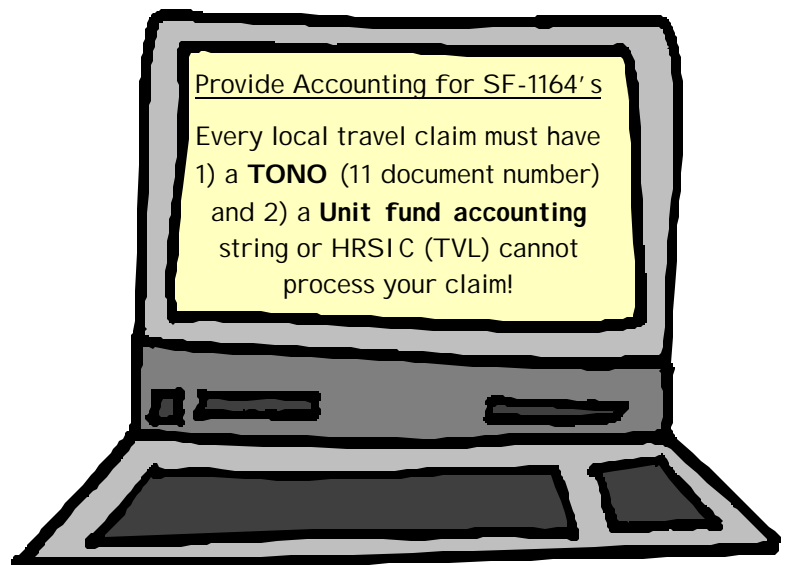
HRSIC processes those expenditures that fall under code “A” (Local Travel) of the SF-1164. These local travel expenses may be described as:

- y Official Travel
- y Using a Privately Owned Vehicle
- y Mileage Reimbursement
- y Public Transportation (i.e., taxi fares as approved for local business)

Travelers can claim, when **itemized**, and if such expenses were required in the conduct of their authorized local travel, the following:

- y Associated ferry and/or bridge and toll roads
- y Phone or cellular calls
- y Parking fees
- y Actual cost of an occasional meal (when it is determined the member was required to procure a meal at personal expense outside the permanent duty station limits – TDY within the local area of the PDS but outside the PDS limits)

Note: Do not use SF-1164 if overnight lodging was required. Instead, submit a DD-1351-2 (Aug 97) with TDY orders.



SF-1164 EXAMPLE

CLAIM FOR REIMBURSEMENT FOR EXPENDITURES ON OFFICIAL BUSINESS		1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE USCG Group Somewhere		2. VOUCHER NUMBER	
				3. SCHEDULE NUMBER	
<i>Read the Privacy Act Statement page 2 of this form.</i>				5. PAID BY	
C L A I M A N T	4. a. NAME (Last, first, middle initial)		b. SOCIAL SECURITY NO.		
	Doe, John D. BM1/E-6 (Military or Civilian)		123-45-6789		
	c. MAILING ADDRESS (Include ZIP Code)		d. OFFICE TELEPHONE NUMBER		
	PO Box 111 Somewhere, VA 12345-6789		555-123-4567		
6. EXPENDITURES (If fare claimed in col. (g) exceeds charge for one person, show in col. (h) the number of additional persons which accompanied the Claimant.)					
DATE 1999		Show appropriate code in col. (b): A - Local travel B - Telephone or telegraph, or C - Other Expenses (itemized)		MILEAGE RATE .31 \$	
		(Explain expenditures in specific detail.)		NO. OF MILES (e)	
(a)	(b)	(c) FROM	(d) TO	(f)	(g)
06OCT	A	Group Somewhere	Station Anywhere	73	22.63
06OCT	A	Station Anywhere	Group Somewhere	73	22.63
09OCT	A	Home	ISC Elsewhere	127	39.37
09OCT	A	ISC Elsewhere	Home	127	39.37
09OCT	C	Parking fee @ Al's	Parking for 3 hrs		
		When starting local travel from home, include			
		the following: (Applies to all travelers)			
		"I certify the oneway commuting distance from			
		my home to my PDS by the usually traveled			
		route is () miles."			
SUBTOTALS CARRIED FORWARD FROM THE BACK					
If additional space is required continue on page 2.					
7. AMOUNT CLAIMED (Total of cols. (f), (g) and (i).)				TOTALS	
127.00				400 124.00 3.00	
8. This claim is approved. Long distance telephone calls, if shown, are certified as necessary in the interest of the Government. (Note: If long distance calls are included, the approving official must have been authorized in writing, by the head of the department or agency to so certify (31 U.S.C 680a).)				10. I certify that this claim is true and correct to the best of my knowledge and belief and that payment or credit has not been received by me. <i>Sign Original Only</i>	
<i>Sign Original Only</i>				PAYMENT DESIRED <input type="checkbox"/> CHECK <input type="checkbox"/> CASH CLAIMANT SIGN HERE Member's Signature DATE 99OCT27	
APPROVING OFFICIAL SIGN HERE J.S. Smith, YN1, USCG DATE 99OCT27				11. CASH PAYMENT RECEIPT	
9. This claim is certified correct and proper for payment. <i>Sign Original Only</i>				a. PAYEE (Signature)	
AUTHORIZED CERTIFYING OFFICER SIGN HERE J.S. Smith, YN1, USCG DATE 99OCT27				b. DATE RECEIVED	
ACCOUNTING CLASSIFICATION 11/99/1234XX265000 2/7/901/123/30/0/XX/12345/1234				c. AMOUNT	
				12. PAYMENT MADE BY CHECK NO.	